

Legal Aid Services of Oregon
Law School Loan Repayment Enrollment Form

LASO attorneys covered by the Union Collective Bargaining Agreement and Manager's Policies who must repay law school loans shall receive the monthly amount of their loan payments, up to \$300 per month. Payments will be made to attorneys through their regular paychecks. These amounts will be pro-rated for part-time attorneys under 75% time.

EMPLOYEE NAME: _____

OFFICE: _____

Law School: _____

Dates of Attendance: _____

Lending Institutions holding loans:

Lender #1: _____

address: _____

loan #: _____

amount owing as of signature date:

monthly payment amount: \$_____

(Continue on back if there are additional lenders)

(Please attach documentation to verify current loan amount or monthly payment amount)

Total Amount Owing on all Law School Loans: \$_____

Current Monthly Payment Amount: \$_____

I declare that the information on this form is true. I understand that I will be receiving Law School Loan Repayment Plan payments included in my regular paychecks that are to be used for the payment of the loans listed on this form. I agree to notify the LASO Human Resources Coordinator if my monthly payment falls below \$300, or if there is any change in the loan amount if the payment is below \$300/month. I also understand that payroll taxes will be deducted from the monthly payment amount, which will be up to \$300/month, and that I am responsible for any tax liability for payments received.

DATE: _____

SIGNATURE: _____

Additional Lending Institutions:

Lender #2: _____

address: _____

loan #: _____

amount owing as of signature date:

monthly payment amount: \$_____

Lender #3: _____

address: _____

loan #: _____

amount owing as of signature date:

monthly payment amount: \$_____